

CALCULATION SHEET

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

CLAIMS

CALCULATION SHEET						SERIAL NO.	FILING DATE		
						APPLICANT: 1			
CLAIMS									
1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		51	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
2	/						52		
3		/					53		
4		/					54		
5	/						55		
6		/					56		
7	/						57		
8		/					58		
9		/					59		
10		/					60		
11		/					61		
12		/					62		
13							63		
14							64		
15							65		
16							66		
17							67		
18							68		
19							69		
20							70		
21							71		
22							72		
23							73		
24							74		
25							75		
26	/						76		
27							77		
28		/					78		
29		/					79		
30		/					80		
31							81		
32		/					82		
33		/					83		
34		/					84		
35		/					85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.		4					TOTAL IND.		
TOTAL DEP.		32					TOTAL DEP.		
TOTAL CLAIMS		35					TOTAL CLAIMS		